

Child Care Application for Tuition Reimbursement

Section 92 of *The Child Care Regulations, 2015* states the Minister may make a grant to a licensee of a facility for the reimbursement of tuition fees paid and required books purchased for courses in early childhood education that are successfully completed by a person for the purpose of meeting the requirements of these regulations.

As of September 1, 2010, all Tuition Reimbursement Grant submissions must be received within one year following the completion of an eligible class.

You are not eligible to receive tuition reimbursement for courses/programs with no tuition fees/book costs, or if your tuition/book expenses are being paid in full by an alternative funding source (scholarship, bursary, grant, other source). If you are receiving alternative funding for tuition fees/book costs for less than \$500 per course, you may be eligible for tuition reimbursement for the portion not covered by alternative funding, up to \$500 per course.

I hereby make application for the tuition reimbursement in respect to the following classes:

_____ First Name of ECE Employee/Caregiver	_____ Middle Name <input type="checkbox"/> M <input type="checkbox"/> F	_____ Last Name
_____ Previous Names (if applicable)	_____ Gender <input type="checkbox"/> None <input type="checkbox"/> ECE 1 <input type="checkbox"/> ECE 2 <input type="checkbox"/> ECE 3	_____ Birth Date (Year/Month/Day)
_____ Start Date of Employment (Year/Month/Day)	_____ Current Certification Level	_____ Certification Date (Year/Month/Day)
_____ Primary Position	_____ Current Hourly Wage	_____ Employment End Date (if applicable) (Yr/Mo/Day)

Employment Type: Full-time Part-time Over 64 hours/month Part-time Under 65 hours/month Casual Summer Relief

Course Name and Number	Institution	Date of Completion	Tuition Amount	Book Amount
1)				
2)				
3)				
4)				
5)				

Child Care Centre/Provider Name: including site name, if applicable	_____
Early Learning & Child Care Consultant Name:	_____

Included is the **required documentation** confirming expenditures and successful completion of the above courses:

- Photocopy of tuition receipt from the Institution as proof of payment. (Please write class name and number on receipt.)
- Photocopy of receipt for required books/resources as proof of payment. (Please indicate which class each book is for.)
- Photocopy of transcripts or unofficial online transcripts from Institution indicating successful completion of classes.

I hereby certify that this information is correct.

Date: _____
Year/Month/Day

Signature of Board Representative/Family Child Care Home Provider

I certify that no previous or alternate claim has been made for the portion of the tuition fee for which we are requesting reimbursement.

Date: _____
Year/Month/Day

Signature of ECE Employee/Caregiver

EY 09/2018